

EARTH SCIENCES DIVISION
PROPOSAL INITIATION FORMTITLE _____
_____PRINCIPAL INVESTIGATOR(S) (phone, fax, e-mail address,) _____
_____SPONSOR: _____
CONTACT: _____
ADDRESS: _____
_____TELEPHONE: _____ FAX: _____
e-mail: (if DOE, name of program, and manager; if WFO, Scientific/Technical contact)Brief Description of Proposal: _____

_____Is this a formal solicitation (RFP or BAA)? If so, please attach forms or location of where
documentation can be found. ☐ YES ☐ NO http:// _____Is the sponsor a Small Business? ☐ YES ☐ NO

DUE DATE TO SPONSOR: _____ B&R Category (DOE funded): _____

START DATE _____ DURATION: _____ (yrs or months)

(\$) _____ Total Request ☐ Check box If asking for Waiver of Full Recovery
(Depreciation and DOE-Added Factor for WFO non-fed sponsors)

Proposal Review (signatures of reviewers or an accompanying e-mail required)

Program Head _____
Signature DateTechnical review by _____
Signature DateIs this a new proposal? _____ if no, Project #(acct number) _____

Other organizations involved? _____

Cost sharing (organization name and \$ contributed (in-kind, etc.)? _____

EARTH SCIENCES DIVISION
PROPOSAL INITIATION FORM
BUDGET ESTIMATE WORKSHEET

1. Lab Personnel: (example: John Smith, Scientist, ESSG, 2 months , by fiscal year)

(Name or classification if unnamed Scientist, Post Doc, etc.) ; payroll acct; person-months; (please specify all or which FY); and Divisional affiliation if not ES; list non lab personnel under Other)

2. Shop time (estimate per/FY \$): _____

(name of shop or individual; Division/Bldg.; hourly rate(x)number of hours)

3. Subcontracts (estimate per/FY \$): consultants, UCB collaborators (IUT), include documents) _____

4. Equipment(estimate per/FY \$): _____

(name of item; vendor quote; include set up costs; Lab bldg to be housed)

5. Supplies or Purchases(estimate per/FY \$): _____

List of items to be purchased:, i.e. chemicals, small parts, publication costs, etc.)

6. Travel (\$ per/FY): _____

(Domestic/Foreign destination; Estimate airfare, per diem, incidentals, etc.)

7. Other Direct Costs (Include recharges for space, telephone, computing services, copying, etc)._____

8. Special Requirements: _____

ESD Division Office personnel will use this information to construct proposal budget
estimate

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PROPOSAL INITIATION FORM

Review Factors for DOE (Non Federal Sponsors only):

**Proposed work requires LBNL's special expertise, unique capability, or unique facilities;
private facilities are inadequate for performance of proposed work. Explanation given below**

PLEASE USE BACK OF FORM OR ADD PAGES TO PROVIDE ADDITIONAL INFORMATION.

Please allow at least 3 weeks for processing by other offices.